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Comments: Please see attached.

Docket No.: 14458.67

Serial No.: 10/719,333

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## CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

Applicant(s): James D. Isaacson et al.

Docket No.

14458.67

Application No.

10/719,333

Filing Date

11/21/2003

Examiner

GIBSON, ROY DEAN

Group Art Unit

3739

Invention: TUNED RETURN ELECTRODE WITH MATCHING INDUCTOR

I hereby certify that this Request for Continued Examination (RCE) and Amendment "B"  
(Identify type of correspondence)

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- Amendment Transmittal Letter (1 page)
- Amendment "B" (19 pages)
- PTO-2038 Credit Card Form (1 page)
- Certificate of Facsimile (1 page)

P18/REV02

FEB 21 2006

<b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b>				Docket No. 14458.67	
Applicant(s): James D. Isaacson et al.					
Application No. 10/719,333	Filing Date 11/21/2003	Examiner GIBSON, ROY DEAN	Customer No. 022913	Group Art Unit 3739	Confirmation No. 2614
Invention: TUNED RETURN ELECTRODE WITH MATCHING INDUCTOR					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	69 -	58 =	11	x \$25.00	\$275.00
INDEP. CLAIMS	7 -	7 =	0	x \$100.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$275.00</b>
<input type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 23-3178 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>					
 Signature			Dated: February 21, 2006		
<b>FRASER D. ROY</b> Attorney for Applicants Registration No. 45,666 Customer No. 022913			I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence		
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P11SMALL/REV09